| PATENT APPLICATION FEE DETERMINATION RE<br>Effective December 8, 2004  |  |   |   |   |  |                          |            | Application (10)549 |                        | or Docket No | umber               |                        |
|--|--|---|---|---|--|--------------------------|------------|---------------------|------------------------|--------------|---------------------|------------------------|
| FLAIMS AS FILED - PART I<br>FLES Based and<br>Original Claims (Column 1)   |  |   |   |   |  | Column 2)                | _          | SMALL ENT           |                        | OR           | OTHER<br>SMALL E    |                        |
|  | -  | STAGE FEES                                      |   |   |  |                          |            | RATE                | FEE                    |              | RATE                | FEE                    |
| BASIC FEE  |  |   | SMALL ENT, = \$ 150   |   | LARC                                   | SE ENT. = \$ 300         | 1          | BASIC FEE           |                        | OR           | BASIC FEE           | 300                    |
| EXAMINATION FEE  |  |   | Satisfies PCT Article 33(1)-<br>(4) = \$50/\$100                        |   | All other situations = \$ 100 / \$ 200 |                          | ]          | EXAM. FEE           |                        |              | EXAM. FEE           | 200                    |
| SEARCH FEE   |  |   | U.S. is ISA = \$50 / \$ 100<br>ALL other countries =<br>\$ 200 / \$ 400 |   | All other situations = \$ 250 / \$ 500 |                          | ŀ          | SEARCH FEE          |                        |              | SEARCH FEE          | 100                    |
| FEE FOR EXTRA SPEC. PGS.   |  |   | minus 100 =   |   | / 50 =                                 |                          |            | X \$ 125 =          |                        |              | X \$ 250 ≈          |                        |
| TOTAL CHARGEABLE CLAIMS  |  |   | 42 mir  | านร 20 =                                | . 22                                   |                          |            | X\$25=              |                        | OR           | X \$ 50 =           | 1100                   |
| INDEPENDENT CLAIMS   |  |   | 3 m   | inus 3 =                                | •                                      |                          |            | X \$ 100 =          |                        | OR           | X \$ 200 =          | <u> </u>               |
| MUL  | TIPLE DEPEN                                    | DENT CLAIM PR                                   | ESENT   |   |  | Ŋ                        |            | + \$ 180 =          |                        | OR           | + \$ 360 =          | 360                    |
| * If the difference in column 1 is less than zero, enter "0" in column 2   |  |   |   |   |  |                          |            | TOTAL               |                        | OR           | TOTAL               | 206C                   |
| CLAIMS AS AMENDED - PART II (Cotumn 1) (Column 2) (Cotumn 3)   |  |   |   |   |  |                          |            | SMALL E             | NTITY                  | OR           | OTHER<br>SMALL E    |                        |
| AMENDMENT A  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT       |   | HIGH<br>NUM<br>PREVIO<br>PAID           | BER<br>DUSLY                           | PRESENT<br>EXTRA         |            | RATE                | ADDI-<br>TIONAL<br>FEE |              | RATE                | ADOI-<br>TIONAL<br>FEE |
|  | Total  | •   | Minus   | ••                                      |  | =                        |            | X \$ 25 =           |                        | OR           | X \$ 50 =           |                        |
|  | Independent                                    | •   | Minus   | •••                                     |  | =                        |            | X \$ 100 =          |                        | OR           | X \$ 200 =          |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |   |   |  |                          |            | + \$ 180 =          |                        | OR           | + \$ 360 =          |                        |
|  | ·  |   |   |   |  |                          | •          | TOTAL ADDIT.        |                        | OR           | TOTAL ADDIT.<br>FEE |                        |
|  |  |   |   |   |  |                          |            |                     |                        |              |                     |                        |
| AMENDMENT 8  | :  | (Column 1)  CLAIMS  REMAINING  AFTER  AMENDMENT |   | (Colur<br>HIGH<br>NUM<br>PREVIC<br>PAID | EST<br>BER<br>XUSLY                    | (Column 3) PRESENT EXTRA |            | RATE                | ADDI-<br>TIONAL<br>FEE |              | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | •   | Minus   | **                                      | _                                      | 9                        |            | X \$ 25 =           |                        | OR           | X \$ 50 =           |                        |
|  | Independent                                    | •   | Minus   | •••                                     |  | =                        |            | X \$ 100 =          |                        | OR           | X \$ 200 =          |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT OF    |   |   | CLAIM                                   |  |                          | + \$ 180 = |                     | OR                     | + \$ 360 =   |                     |                        |
|  |  |   |   |   |  |                          |            | TOTAL ADDIT.<br>FEE |                        | OR           | TOTAL ADDIT.        |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20".  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.  ** ORM PTO-875 ** (Rev. 17/2005)**  ** Patent and Trademark Office - U.S. DEPARTMENT OF COMMERCE |  |   |   |   |  |                          |            |                     |                        |              |                     |                        |

\*Excess money refunded. Claims attached to Sub-Spec inst entered. (no Instructions for entry) Proper smoot not siles. 11-02-06